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3458 ELLICOTT CENTER DRIVE-SUITE 101 ELLICOTT CITY, MD 21043 FAX #: 410-461-3067 E-MAIL ADDRESS: rki@rkipatiaw.com I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. FAMILY Mailing Address 2-015 191021 Rudan Full name of second joint threntor, if any (given name, family name) Second inventor's signature (MANN IS FAMILY NAME) Date Citizenship . Mailing Address CAROL ERGEAT TENDE CENTER, 5 HELH YZ ROBO, Sec. 5 THIWM Additional Inventors are being named on separately numbered sheets attached hereto.

NAME)